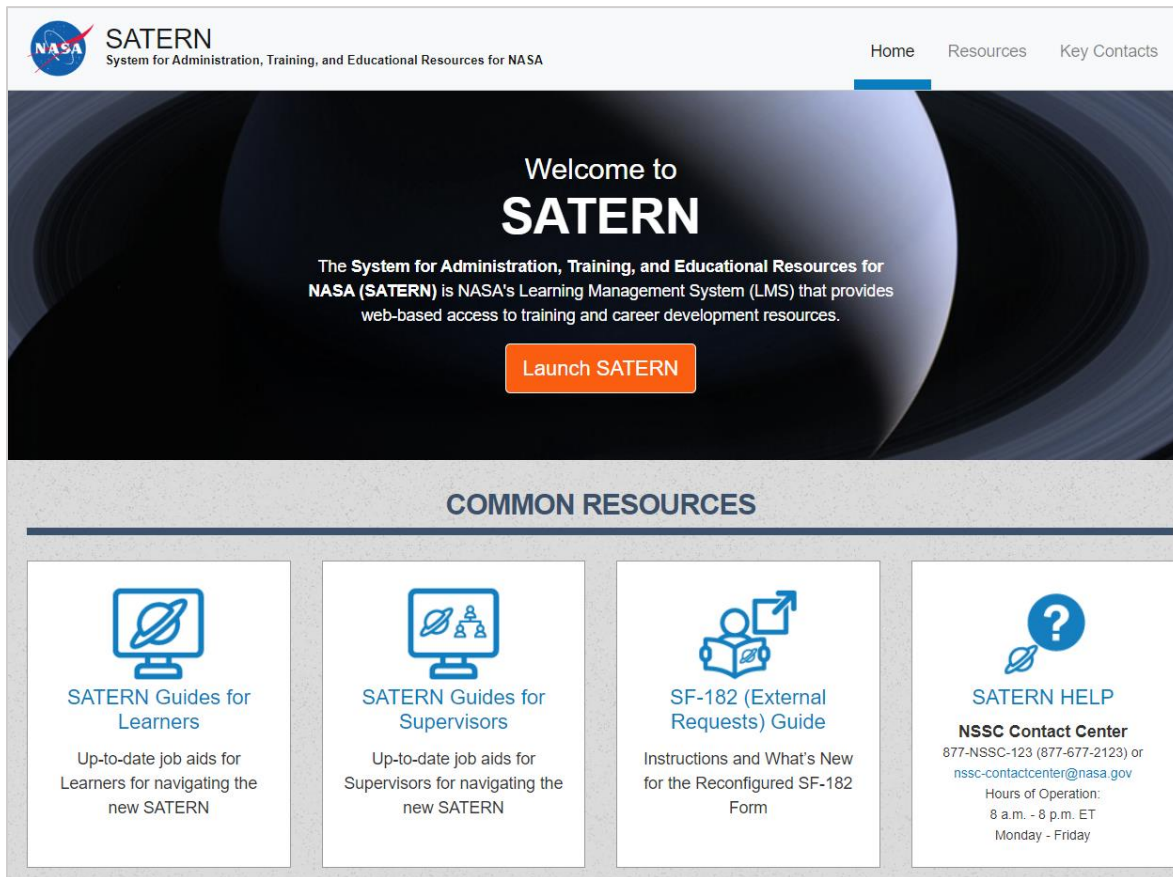
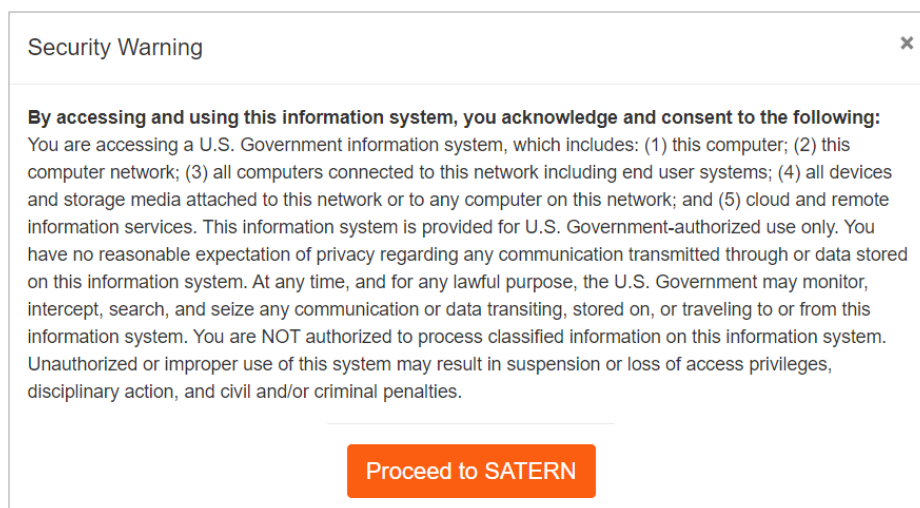


SF-182 User Guide:

To access the SF-182 – External (Offsite) Training Request Form - Log on to SATERN via <https://satern.nasa.gov/>



- Click “Launch SATERN”
- Security Warning will pop-up in a separate window, click “Proceed to SATERN”



- Learner page will load and under “Quick Links” – select “SF-182 (External Requests)”

- Request, Authorization, Agreement and Certification of Training page will load, scroll to the bottom of the page and select “New SF-182 Request”

| ID | Title | Start Date | End Date | Status | Action |
|--------|------------------------|------------|-----------|-----------|--------------------------|
| 150332 | Academic - Thor Skills | 9/30/2019 | 10/4/2019 | Submitted | Pending NSSC Procurement |
| 150331 | Thor Skills | 9/30/2019 | 10/4/2019 | Submitted | Pending NSSC Procurement |
| 150318 | Super Superman Skills | 9/30/2019 | 10/4/2019 | Submitted | Pending NSSC Procurement |

Records per Page: 10 Page: 1 2 3 4 5 «Previous Next» (52 total records)

New SF-182 Request

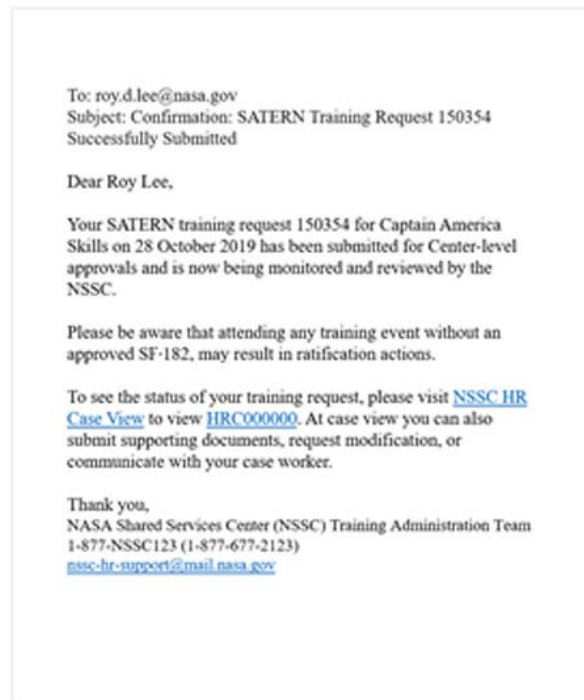
There are 4 potential roles within the process: **(1) Learner; (2) Supervisor; (3) Funding Approver; and (4) Academic Approver**

Learner – Any Civil Servant employee at NASA who submits an SF-182 Offsite request. Learners should create a new SF-182 and provide the information requested in the Red Highlighted fields. All fields denoted by an asterisk are required for submission and learners should ensure all asterisk fields are completed.

The following is a listing of all Red Highlighted fields, with required fields represented by *:

- A.6. Position Level
- A.7. Training Registration Dates
 - Early-Bird Registration Deadline, if applicable (MM/DD/YYYY)
 - * Last Day to Register (MM/DD/YYYY)
- A.8. NCTS# (start w/N and includes no spaces)
- A.9. Contact Email Address (*Learner or Designee email to assist with request related questions*)
- * A.11. Requesting Expedite Processing? (Yes/No)
- * B.1a. Name and Mailing Address of Training Vendor
- B.1c. Vendor Email Address
- B.1d. Vendor Phone Number
- * B.2a. Course Title
- * B.3. Training Start Date (MM/DD/YYYY)
- * B.4. Training End Date (MM/DD/YYYY)
- * B.11. Training Designation Type Code
- * B.18. Course Objectives and Justification
- B.19. Vendor Registration Website Link
- * C.1. Direct Cost and appropriation/fund chargeable
- * C.2. Indirect Cost and appropriation/fund chargeable
- C.6. Additional Comments: *i.e. Registration Information, Active Membership #, Special Accommodations, Conference Session Selections, etc.*

Learners will receive email notification from nssc-hr-support@mail.nasa.gov via ServiceNow approximately 90 minutes after submitting a request for Offsite training to provide them status, next steps, and link to case view to monitor and interact with the request and case worker. Learner will have access to this case throughout the life cycle of the training event.



SF-182 Supervisor Approver – Supervisor reviews and approves request in SATERN. Supervisor Approver will receive email notification from nssc-hr-support@mail.nasa.gov via ServiceNow approximately 90 minutes after the Learner submits the request within SATERN, requesting that they review and approve the request in SATERN. A direct link will be provided within the body of the email to their approval queue.

Supervisor Approver verifies/approves:

- The training is intended to improve individual and organizational performance related to NASA's mission
- A relationship exists between the knowledge, skills, and abilities the training is intended to provide and the employee's lawfully assigned duties
- Reviews SF-182 fields B.2.A – Course Title; B.3 and B.4 - Training Start and End Date; B.5 - Training Duty Hours; and B.18. Course Objectives and Justification

| | | | | | |
|--|--|--|--|---|--|
| * B.2a. Course Title | | B.2b. Catalog/Course Number | | * B.3. Training Start Date (MM/DD/YYYY) | * B.4. Training End Date (MM/DD/YYYY) |
| Captain America Skills | | | | 10/28/2019 | 11/01/2019 |
| * B.5. Training Duty Hours | | B.6. Training Non-Duty Hours | | B.7. [FUNDING APPROVER] Purchase Request Type | |
| 40 | | | | -- Please Select One -- | |
| B.9. Training Type/Sub Type Code | B.10. Training Delivery Type Code | * B.11. Training Designation Type Code | | B.12. Academic Credit Hours (If non-academic enter "0") | B.13. Training Credit Type Code |
| -- Please Select One -- | -- Please Select One -- | 01:Undergraduate Credit | | academic enter "0" | -- Please Select One -- |
| B.14. Training Accreditation Indicator | B.15. Continued Service Agreement Required Indicator | B.16. Continued Service Agreement Required Expiration Date | | B.17. Training Source Type Code | |
| <input type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A | | | -- Please Select One -- | |
| * B.18. Course Objectives and Justification | | | | B.19. Vendor Registration Website Link | |
| Learn how to be a hero! | | | | hrs-services.nssc.nasa.gov | |

Within an hour of approval, SATERN sends a notification to ServiceNow to update the case to capture the Supervisor Approver action. Once the case is updated, ServiceNow will send an email to the employee notifying them of the approval decision.

NOTE: If the SF-182 request is "No-Cost", Supervisor Approver is the only Center-level approval required.

SF-182 Funding Approver - Funding Approver (Budget Analyst, Training Coordinator, Human Resources Business Partner (HRBP)) reviews and approves request in SATERN to determine funding availability, source, and method. Funding Approver will receive email notification from nssc-hr-support@mail.nasa.gov via ServiceNow shortly after the Supervisor Approver authorization is captured within the case. The email requests that the Funding Approver review and approve the request in SATERN through a direct link provided within the body of the email to their approval queue.

Funding Approver verifies/approves:

- Completes all Green Highlighted fields on the SF-182 to determine funding source, method and verifies funding is available
- Funding source is indicated in SF-182 fields A.14 – Funding Center (enter Center who is funding the training regardless of Learner Duty Center or if it is funded at the Agency level. i.e. – AFRC, ARC, GRC, GSFC, JSC, KSC, LARC, MSFC, NSSC, SSC, or Agency); A.15 Funding Organization (enter the Organization that will be paying for training if budget is tracked at this level)
- Determines the appropriate purchase request type, in B.7 – [FUNDING APPROVER] Purchase Request Type. Four options exist – "NSSC to Purchase", "Project Funded Purchase Completed at Center", "Reimbursement" or "No Cost"

| | | | | | |
|-------------------|-----------------------|----------------------|----------------------------|----------------------|---|
| A.12. Duty Center | A.13. Education Level | A.14. Funding Center | A.15. Funding Organization | A.16. Pay Plan/Grade | A.17. [ACADEMIC COORDINATOR] Academic Program Name, if applicable |
| NSSC | 17 | SSC | XD022 | GS-14 | |

SECTION B: TRAINING COURSE DATA Instructions

B.1a. Name and Mailing Address of Training Vendor

* ☐ ID Name ☐ Other If Other, please specify

Street Address City State / Province Postal Code Country

B.1b. Physical Address of Training Event (If Academic, confirm billing location for school, as this can vary depending on selected program of study)

☐ If Same, mark box.

Street Address City State / Province Postal Code Country

B.1c. Vendor Email Address **B.1d. Vendor Phone Number**

* **B.2a. Course Title** **B.2b. Catalog/Course Number** * **B.3. Training Start Date** (MM/DD/YYYY) * **B.4. Training End Date** (MM/DD/YYYY)

* **B.5. Training Duty Hours** **B.6. Training Non-Duty Hours** **B.7. [FUNDING APPROVER] Purchase Request Type**

PT2:Project Funded Purchase Completed at Center

- For “Project Funded Purchase Completed at Center”, the Funding Approver is responsible for coordinating with the local card holder to complete payment and registration at the appropriate program/project level
- For “NSSC to Purchase” SF-182 requests that require one of the following:
 - Use Working Capital Funds previously IPACd from the Center to NSSC
 - The transfer of funds between Center project and institutional funding sources to the NSSC (This is an action completed prior to approval and worked by the appropriate Center Budget Analysts in coordination with the NSSC Budget and Accounting Division)
- For “Reimbursement”, the Learner pays out by personal expense then requests to be reimbursed
- For “No Cost” there is no associated training cost and data entry record is requested to show attendance in SATERN
- If applicable, complete Field C.5. Indicate Funding WBS Code on the SF-182

Within an hour of approval, SATERN sends a notification to ServiceNow to update the case to capture the Funding Approver action. Once the case is updated, ServiceNow will send an email to the employee notifying them of the approval decision.

SF-182 Academic Coordinator Approver - Center Academic Coordinator Approver only reviews academic training requests as indicated by the Learners selection on B.11. Training Designation Type Code on the SF-182. Academic Coordinator Approver will receive email notification from nssc-hr-support@mail.nasa.gov via ServiceNow shortly after the Funding Approver authorization is captured within the case. The email requests the Academic Coordinator Approver review and approve the request in SATERN through a direct link provided within the body of the email to their approval queue.

| | | | | | |
|--|--|--|--|---|---------------------------------|
| 40 | | | | -- Please Select One -- | |
| B.9. Training Type/Sub Type Code | B.10. Training Delivery Type Code | * B.11. Training Designation Type Code | | B.12. Academic Credit Hours (If non-academic enter "0") | B.13. Training Credit Type Code |
| -- Please Select One -- | -- Please Select One -- | 01:Undergraduate Credit | | | -- Please Select One -- |
| B.14. Training Accreditation Indicator | B.15. Continued Service Agreement Required Indicator | B.16. Continued Service Agreement Required Expiration Date | | B.17. Training Source Type Code | |
| <input type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A | | | -- Please Select One -- | |
| * B.18. Course Objectives and Justification | | B.19. Vendor Registration Website Link | | | |

Academic Coordinator Approver verifies/approves:

- Verifies employee is authorized to participate in the academic program
- Provides the Academic Program Name in field A.17 "[ACADEMIC COORDINATOR] Academic Program Name, if applicable" If there is no academic program name then N/A should be included; If N/A, indicate in the Academic Coordinator Approver comments if grade transcript is required

| | | | | | |
|---------------------------------|---|----------------------|--|----------------------|---|
| A.10. Position Title | A.11. Requesting Expedite Processing? | | Please provide expedite reason/justification | | |
| SUPV HUMAN RESC | * <input type="radio"/> Yes <input checked="" type="radio"/> No | | | | |
| A.12. Duty Center | A.13. Education Level | A.14. Funding Center | A.15. Funding Organization | A.16. Pay Plan/Grade | A.17. [ACADEMIC COORDINATOR] Academic Program Name, if applicable |
| NSSC | 17 | SSC | XD022 | GS-14 | |
| SECTION B: TRAINING COURSE DATA | | | | | Instructions |

Within an hour of approval, SATERN sends a notification to ServiceNow to update the case to capture the Academic Coordinator Approver action. Once the case is updated ServiceNow will send an email to the employee notifying them of the approval decision.

Field Instructions

Section A Fields:

Fields highlighted in RED = To be completed by Learner

Fields highlighted in GREEN = To be completed by Funding Approver, as applicable

Fields highlighted in BLUE = To be completed by Academic Coordinator Approver

| | | | | | |
|--|--|---|--|---|--|
| A.7. Training Registration Dates Early-Bird Registration Deadline, if applicable (MM/DD/YYYY) * Last Day to Register (MM/DD/YYYY) | | A.8. NCTS# (start w/N and includes) | | A.9. Contact Email Address Learner or Designee email to assist with request | |
| Learner | | | | | |
| A.10. Position Title SUPV HUMAN RESC | | A.11. Requesting Expedite Processing? <input type="radio"/> Yes <input checked="" type="radio"/> No | | Please provide expedite reason/justification | |
| A.12. Duty Center NSSC | | A.13. Education Level 17 | | A.14. Funding Center SSC | |
| | | A.15. Funding Organization XD022 | | A.16. Pay Plan/Grade GS-14 | |
| | | | | A.17. [ACADEMIC COORDINATOR] Academic Program Name, if applicable | |
| SECTION B: TRAINING COURSE DATA | | | | | |
| B.1a. Name and Mailing Address of Training Vendor | | | | | |

Section A Fields:

| REQUEST, AUTHORIZATION, AGREEMENT & CERTIFICATION OF TRAINING | | | | | | | |
|---|-----------------------|---|----------------------------|---|---|--|--------------|
| SECTION A: TRAINEE INFORMATION | | | | | | | Instructions |
| B. Request Status / Record Action | | | | | | | |
| <input checked="" type="radio"/> Add | | | | <input type="radio"/> Delete | | | |
| A.1. Applicant's Name | | | | First Five Letters of Last Name | | | |
| Last Name | First Name | Middle Initial | LEE | | | | |
| Lee | Roy | D | | | | | |
| A.4. Work Address | | | A.5. Work Phone | | A.6. Position Level | | |
| Street Address | NSSC - NASA - NASA S | | (228) 813-6133 | | <input type="radio"/> a. Non-supervisory <input type="radio"/> b. Manager | | |
| City | State / Province | Postal Code | Country | <input type="radio"/> c. Supervisory <input type="radio"/> d. Executive | | | |
| Stennis Space Center | MS | 39529-6000 | US | | | | |
| A.7. Training Registration Dates | | A.8. NCTS# | | A.9. Contact Email Address | | | |
| Early-Bird Registration Deadline, if applicable (MM/DD/YYYY) | | (start w/N and includes) | | Learner or Designee email to assist with request | | | |
| * Last Day to Register (MM/DD/YYYY) | | (no spaces) | | related questions | | | |
| 05/03/2020 | | | | | | | |
| 09/30/2019 | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| A.10. Position Title | | A.11. Requesting Expedite Processing? | | Please provide expedite reason/justification | | | |
| SUPV HUMAN RESC | | <input type="radio"/> Yes <input checked="" type="radio"/> No | | | | | |
| A.12. Duty Center | A.13. Education Level | A.14. Funding Center | A.15. Funding Organization | A.16. Pay Plan/Grade | A.17. [ACADEMIC COORDINATOR] | | |
| NSSC | 17 | SSC | XD022 | GS-14 | Academic Program Name, if applicable | | |

A.1: Applicant's Name - Pre-populated

A.4: Work Address - Pre-populated

A.5: Work Phone - Pre-populated

A.6. Position Level – Learner to select the appropriate position level based on supervisory status

A.7. Training Registration Dates – Learner to provide deadlines as indicated by vendor

Early-Bird Registration Deadline, if applicable (MM/DD/YYYY) – Provide discounted rate deadline

*** Last Day to Register (MM/DD/YYYY)** - Provide final day to register for the event

A.8. NCTS# (start w/N and includes no spaces) – Learner to provide NCTS # for foreign conferences and NASA officially sponsored conferences. NCTS conference and learner approval will be required for purchase, registration, and attendance.

A.9. Contact Email Address (Learner or Designee email to assist with request related questions) – Defaults to Learner email, but if the Learner wants another person to answer registration related questions on their behalf they can indicate the individual by utilizing their NASA email here.

A.10: Position Title - Pre-populated

***A.11. Requesting Expedite Processing? (Yes/No)** – Defaults to “No”, but the Learner can indicate “Yes” and provide a justification for NSSC to increase the priority of the request once it is submitted. **Expedite Reason** – Learner should provide succinct justification for expediting request. Suggested reasons are: Registration Deadline, Early Bird Registration, Limited Seating/Registration Fills Quickly, Deadline to Schedule Travel, or Payment Deadline.

A.12: Duty Center – Pre-populated or completed by the NSSC

A.13: Education Level - Pre-populated

A.14: Funding Center – Funding Approver to complete (i.e. – AFRC, ARC, GRC, GSFC, JSC, KSC, LARC, MSFC, NSSC, SSC, or Agency)

A.15: Funding Organization – Funding Approver to enter the Organization that will be paying for training if budget is filtered down to this level

A.16: Pay Plan/Grade - Pre-populated with Pay Plan/Grade

A.17: [ACADEMIC COORDINATOR] Academic Program Name, if applicable – Academic Coordinator Approver provides name of academic program or N/A

Section B Fields:

| SECTION B: TRAINING COURSE DATA | | | | | Instructions |
|---|--|--|---|---|---------------|
| B.1a. Name and Mailing Address of Training Vendor | | | | | |
| <input checked="" type="radio"/> ID <input type="text" value="1MSFC-HS01"/> | | Name | | <input type="radio"/> Other If Other, please specify <input type="text"/> | |
| Street Address | | * City | * State / Province | Postal Code | Country |
| NSSC - NASA - NASA S | | Stennis Space Cente | MS | 39529-6000 | United States |
| B.1b. Physical Address of Training Event (If Academic, confirm billing location for school, as this can vary depending on selected program of study) | | | | | |
| <input checked="" type="checkbox"/> If Same, mark box. | | | | | |
| Street Address | City | State / Province | Postal Code | Country | |
| Building 1100 Conferenc | Stennis Space Cente | Mississippi | 39529 | United States | |
| B.1c. Vendor Email Address | | | B.1d. Vendor Phone Number | | |
| Kim.Miller@usm.edu | | | 2286883170 | | |
| * B.2a. Course Title | B.2b. Catalog/Course Number | * B.3. Training Start Date (MM/DD/YYYY) | * B.4. Training End Date (MM/DD/YYYY) | | |
| Advanced Jedi Skills | | 9/30/2019 | 10/4/2019 | | |
| * B.5. Training Duty Hours | | B.6. Training Non-Duty Hours | B.7. [FUNDING APPROVER] Purchase Request Type | | |
| 40 | | | -- Please Select One -- | | |
| B.9. Training Type/Sub Type Code | B.10. Training Delivery Type Code | * B.11. Training Designation Type Code | B.12. Academic Credit Hours (If non-academic enter "0") | B.13. Training Credit Type Code | |
| -- Please Select One -- | -- Please Select One -- | 05:N/A - Non-Academic Tr | | -- Please Select One -- | |
| B.14. Training Accreditation Indicator | B.15. Continued Service Agreement Required Indicator | B.16. Continued Service Agreement Required Expiration Date | B.17. Training Source Type Code | | |
| <input type="radio"/> Yes <input type="radio"/> No | <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> N/A | | -- Please Select One -- | | |
| * B.18. Course Objectives and Justification | | | B.19. Vendor Registration Website Link | | |
| Learn to be an advanced Jedi | | | hrservices.nssc.nasa.gov | | |

Fields highlighted in RED = To be completed by Learner

Fields highlighted in GREEN = To be completed by Funding Approver, as applicable

Fields highlighted in BLUE = To be completed by Academic Coordinator Approver

B.1a: Name and Mailing Address of Training Vendor - Search for vendor and click "Select" if found. Selected vendors will auto-populate the address fields. If vendor is not listed, select "Other". Provide details (e.g., name, mailing address, fax number, country) of training vendor. Contact the vendor to obtain the required information if necessary.

B.1b: Physical Address of Training Event (If Academic confirm billing location for school, since this can vary depending on selected program of study) - If same as block 1a, check the box. Not listing the correct location of Training can result in billing issues and payment delays.

B.1c: Vendor E-mail Address – Learner provide if available

B.1d: Vendor Telephone Number – Learner provide if available

B.2a: Course Title – Learner to enter the exact title from the course materials. Spell out acronyms.

B.2b: Catalog/Course Number – NSSC will enter the vendor number/identifier or college/university number assigned to the course

B.3: Training Start Date – Learner to provide date the training will start

B.4: Training End Date – Learner to provide date the training will end

B.5: Training Duty Hours – Learner to indicate the number of hours (duty) during which training will occur, so Supervisor will be aware of how many hours the Learner will be out of the office

B.6: Training Non-Duty Hours - Indicate the number of hours (non-duty) during which training will occur

B.7: [FUNDING APPROVER] Purchase Request Type – Funding Approver identifies the purchase type for proper routing i.e. “NSSC to Purchase”; “Project Funded Purchase Completed at Center”; “Reimbursement”; or “No Cost”

B.9: Training Type/Sub Type Code – NSSC to complete

B.10: Training Delivery Type Code – NSSC to complete

B.11: Training Designation Type Code – Learner to select one of the following - Undergraduate Credit; Graduate Credit; Continuing Education Credit; Post Graduate Credit; or Non-Academic Training

B.12: Academic Credit Hours (If non-academic enter "0") – NSSC to complete

B.13: Training Credit Type Code – NSSC to select from dropdown

B.14: Training Accreditation Indicator - Yes/No radio button to be selected by the NSSC

B.15: Continued Service Agreement Required Indicator - Yes/No radio button to be selected by the NSSC

B.16: Continued Service Agreement Required Expiration Date – NSSC will calculate

B.17: Training Source Type Code – NSSC to select from dropdown

B.18: Course Objectives & Justification – Learner to provide explanation of training and value to current position

B.19: Vendor Registration Website Link – Learner to provide if available

Section C Fields:

| SECTION C: COSTS AND BILLING INFORMATION Instructions | | | | | |
|--|------------|--------------------|--|----------|--------------------|
| C.1. Direct Cost and appropriation/fund chargeable | | | C.2. Indirect Cost and appropriation/fund chargeable | | |
| Item | * Amount | Appropriation Fund | Item | * Amount | Appropriation Fund |
| a. Tuition | \$ 1550.00 | | a. Travel | \$ 0.00 | |
| b. Books or Materials | \$ 0.00 | | b. Per Diem | \$ 0.00 | |
| c. Total | \$ 1550.00 | | c. Total | \$ 0.00 | |
| C.3. Total Training Non-Government Contribution Cost | | | C.6. Additional Comments: <i>i.e. Registration Information, Active Membership #, Special Accommodations, Conference Session Selections, etc..</i> | | |
| \$ <input type="text"/> | | | <div style="border: 1px solid black; height: 150px; width: 100%;"></div> | | |
| C.4. Document / Purchase Order / Requisition Number | | | | | |
| <input type="text"/> | | | | | |
| C.5. Indicate Funding WBS Code, if applicable | | | | | |
| <input type="text" value="XD020 WBS"/> | | | | | |

Fields highlighted in RED = To be completed by Learner

Fields highlighted in GREEN = To be completed by Funding Approver, as applicable

Fields highlighted in BLUE = To be completed by Academic Coordinator Approver

C.1: Direct Cost and Appropriation/Fund Chargeable – Learner to enter amount for tuition and books. This applies to Purchase, Project Funds, and Reimbursement requests. If No Cost, enter "0".

C.2: Indirect Cost and Appropriation/Fund Chargeable – Learner to indicate all related travel costs. If none, enter "0".

C.3: Total training non-Government contribution cost - NSSC to enter costs contributed for training by the employee or other non-Government organizations

C.4: Document / Purchase Order / Requisition Number

C.5: Indicate Funding WBS Code, if applicable – Funding Approver to provide WBS code

C.6: User Comments/Training Comments/Billing Instructions Please provide the following: **Additional Registration Information, Active Membership #, Special Accommodations, Additional Conference Session Selections, Etc.**

To ensure timely processing please supply a Member Number, if requesting a member discount. For conferences, enter the sessions you will attend and links to course registration forms. Be sure to indicate if you are using program or project funds.